

two innocent lives, my fiancée and my unborn child. My responsibilities consist of the necessary care and support to prepare for birth. Mr. Sanders provides the following essential care to ensure a healthy pregnancy and childbirth.

8. Manage all daily medicine injections, which in the beginning range from 3 to 5 injections daily. Injections range from blood thinners, insulin, and other critical hormones to maintain the pregnancy. Take her vitals (blood pressure, temperature, pulse readings for doctors requested medical log. I also bathe, cook, dress and help her get in and out of bed and wheel chair services. It's my sole responsibility to take care of both the Mother and unborn baby. Insert a Dexcom G5 Mobile Continuous Glucose monitoring systems to treat diabetes. Insert a new device into Ms. Carhee arm every week to help control her rising insulin levels.

9. We see three specialist every week to monitor the mother and the unborn baby which includes a one hour drive to Vernon Hills to monitor and help control Ms. Carhee auto immune issues, which has been recently downgraded to every two weeks.

10. Ms. Carhee experiences sever back pains and is under the care a Chiropractic Physician, I escort Ms. Carhee to her weekly appointments 2-3 times per week.

11. On Thursday April 6th during our routine ultra sound exam it was identified that Ms. Carhee has several cysts protruding in her stomach. We have been referred to a GI Specialist at North Western Memorial Hospital. Sense these finding Ms. Carhee has experienced server abdominal cramping, major diarrhea that requires a special diet due to the fact that she can't keep much food down. For which we hope treatment will begin to address this very serious issue.

12. As part of Ms. Carhee auto immune condition We attend weekly injections of Intralipids at the Premier Infusion center. These sessions at the beginning were for two hours every two weeks. We now attend these treatments on a monthly bases.

13. Unfortunately we currently don't have any family members that can step in and assist with this process. Because of the seriousness of Ms. Carhee condition, the frequency of her medical treatments, Ongoing pain and discomfort management, and accurate dispensing of daily medicines. I have taken on the sole responsibility of Ms. Carhee care. Ms. Carhee's mother resides in Calf, is also recovering from a major surgery as is unable to assist her daughter at this time.

14. A Caesarean section delivery is planned for the first week in September. We are requesting that Mr. Sanders continue providing aide and support until September 31, 2018.

15. This request is made in good faith. It is not intended to cause any unreasonable delay in the defendant commencing service of his time.

16. The United States would not be unduly prejudice by granting this request.

17. The ends of justice militate in favor of Your honor granting one more extension of a stay of mitimus for self-surrender.

WHEREFORE the reasons stated above the defendant acting on his own behalf and appearing Pro Se respectfully pray this Honorable Court reconsider granting one final stay of mitimus.

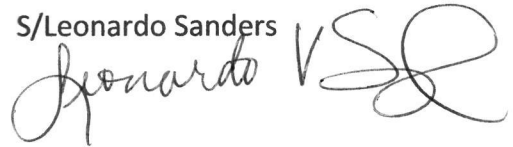
Respectfully submitted,

S/ Leonardo Sanders

NOTICE OF FILING

I, Leonardo Sanders, the defendant in this cause do state and on oath depose that I caused to be served on this day April 10, 2018 a copy of this Emergency Motion For Stay of Mitimus by filing a copy with the United States Clerk of the District Court on the 20th floor at 219 S. Dearborn Chicago, IL 60604 and serving a copy of same upon Chambers pursuant to local rule.

S/Leonardo Sanders

A handwritten signature in black ink, appearing to read 'Leonardo Sanders', followed by a large, stylized 'VSE' or similar mark.

Leonardo Sanders,
Defendant
175 E. Delaware Pl.
Chicago IL 60611
(312) 593-6683



N Northwestern Medicine®

Carhee, Stephanie

1/8/2018 10:40 AM Office Visit

Description: **50 year old female**

Provider: **Renee S Aronsohn**

Department: **NM Primary and Specialty Care Endocrinology**

NM PRIMARY AND SPECIALTY CARE ENDOCRINOLOGY

259 E Erie Street
Suite 2200
Chicago IL 60611
Tel 312-926-6000
Fax 312-926-6344

Please take a few moments to review this summary of your visit. We recommend that you keep this information private as it contains your personal health information and instructions. Please notify the doctor's office if you have any changes or updates. Thank you.

Reason for Visit

Followup

Vitals

BP	Pulse	Ht	Wt	BMI	SpO2
134/92 mmHg	97	5' 6.5" (1.689 m)	200 lb 1.6 oz (90.765 kg)	31.82 kg/m2	99%

Allergies

Unspecified: Ampicillin; Clarithromycin; Gadolinium Derivatives; Levaquin [levofloxacin]; Penicillins; Tetracyclines & Related

Medical Conditions Addressed During This Visit

Hypothyroidism during pregnancy in first trimester - Primary
Type 2 diabetes mellitus during pregnancy, antepartum

Current Medications

LEVEMIR FLEXTouch 100 UNIT/ML SOPN	INJECT 10 UNITS SUBCUTANEOUSLY NIGHTLY AT BEDTIME
Nortriptyline HCl 10 MG CAPS	Take 2 capsules by mouth at bedtime.
SYNTHROID 50 MCG TABS	One tab daily
Glucose Blood STRP	Test four times per day
Blood Glucose Monitoring Suppl W/DEVICE KIT	Test four times daily
NOVOLOG FLEXPEN 100 UNIT/ML SOPN	Use before meals as directed
Insulin Pen Needle 32G X 4 MM MISC	for use with Novolog pen
MetFORMIN HCl 500 MG TABS	1 TABLET TWICE DAILY WITH FOOD
Glucose Blood STRP	testing 3 times daily
Lancets MISC	Testing 3 times daily
ibuprofen 600 MG TABS	1 Tab, PO, Q 8 Hours as needed
Cetirizine HCl (ZYRTEC PO)	None Entered
Multiple Vitamin (MULTI-VITAMIN PO)	None Entered

Medications Administered During Visit

None

Immunizations/medications Administered on Date of Encounter - 1/8/2018

No immunizations or medications administered today

Other Orders Placed During This Visit

Normal Orders This Visit

FREE THYROXINE (FREE T4)

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMFF Lab Services areas.

HEMOGLOBIN A1C

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

TSH

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMFF Lab Services areas.

Future Labs/Procedures

Expected by

Expires

FREE THYROXINE (FREE T4)

1/8/2018

7/8/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMFF Lab Services areas.

HEMOGLOBIN A1C

1/8/2018

7/8/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

TSH

1/8/2018

7/8/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMFF Lab Services areas.

Future Appointments

	Provider	Department	Dept Phone
1/17/2018 9:00 AM	Endocrinologist Mfm	Maternal Fetal Medicine	312-695-7542
1/17/2018 9:00 AM	Ultrasound RM 6	Obstetrics & Gynecology	312-695-0100
1/30/2018 4:00 PM	Anaadriana Zakarija	Ultrasound	
		NM Center for Bleeding and Clotting Disorders	312-695-0990

NMG Website

You can visit the Northwestern Medical Group Website at <http://nmg.nm.org/> to find a physician, request an appointment, pay your bill and for many other useful resources.

N Northwestern Medicine®

Carhee, Stephanie
1/28/2018 2:40 PM Office Visit-New

Description: **50 year old female**
Provider: **Laura McIntyre**
Department: **NMG STREETERVILLE**
IMMEDIATE CARE CENTER

NMG STREETERVILLE IMMEDIATE CARE CENTER
635 N Fairbanks Ct.
Chicago IL 60611
Tel 312-472-3173
Fax 312-472-3176

Please take a few moments to review this summary of your visit. We recommend that you keep this information private as it contains your personal health information and instructions. Please notify the doctor's office if you have any changes or updates. Thank you.

Reason for Visit

Rash x yesterday with rash under left arm, left arm stiffness, fatigue.

Vitals

BP	Pulse	Temp(Src)	Resp	Ht	Wt
(l)146/91	100	98.3 °F (36.8 °C)	19	5' 6.5" (1.689 m)	197 lb (89.359 kg)
mmHg		(Oral)			
BMI	SpO2				
31.32 kg/m2	97%				

Allergies

Unspecified: Ampicillin; Clarithromycin; Gadolinium Derivatives; Levaquin [levofloxacin]; Penicillins; Tetracyclines
& Related

Medical Conditions Addressed During This Visit

Rash - Primary

Current Medications

Unverified Medication (Taking)	progesterone and estrogen injections per pregnancy
Valacyclovir HCl (VALTREX) 1 G TABS	1 tab po TID x 7 days
Prenatal Multivit-Min-Fe-FA (PRENATAL VITAMINS PO) (Taking)	None Entered
acetone, urine, test (KETOSTIX) STRP	test daily as directed
SYNTHROID 75 MCG TABS (Taking)	1 TABLET DAILY
LEVEMIR FLEXTouch 100 UNIT/ML SOPN (Taking)	INJECT 10 UNITS SUBCUTANEOUSLY NIGHTLY AT BEDTIME
Glucose Blood STRP (Taking)	Test four times per day
Blood Glucose Monitoring Suppl W/DEVICE KIT (Taking)	Test four times daily
NOVOLOG FLEXPEN 100 UNIT/ML SOPN (Taking)	Use before meals as directed
Insulin Pen Needle 32G X 4 MM MISC (Taking)	for use with Novolog pen
Glucose Blood STRP (Taking)	testing 3 times daily
Lancets MISC (Taking)	Testing 3 times daily

Medications Ordered During This Visit

	Refills	Start	End
Valacyclovir HCl (VALTREX) 1 G TABS	0/0	1/28/2018	
Sig - Route: 1 tab po TID x 7 days - Oral			

Medications Ordered During This Visit (continued)

Class: E-PRESCRIBE

Pharmacy: WALGREENS DRUG STORE 00211 - CHICAGO, IL 60611-2606

- 757 N MICHIGAN AVE AT CHICAGO & MICHIGAN - PH 312-664-8686 -

FX 312-664-4571

Refills

Start

End

Medications Administered During Visit

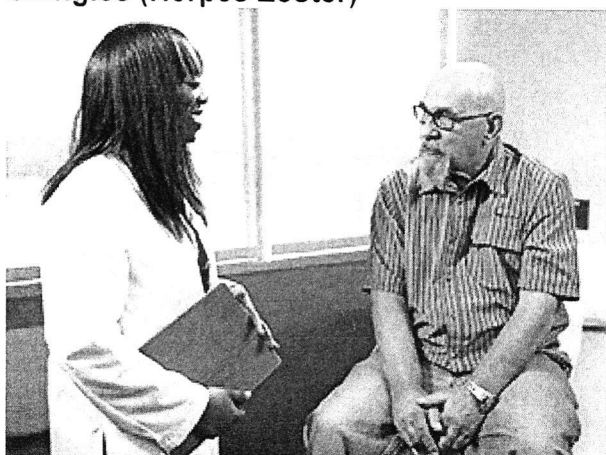
None

Immunizations/medications Administered on Date of Encounter - 1/28/2018

No immunizations or medications administered today

Future Appointments

	Provider	Department	Dept Phone
1/30/2018 4:00 PM	Anaadriana Zakarija	NM Center for Bleeding and Clotting Disorders	312-695-0990
1/31/2018 11:00 AM	Charlotte M Niznik	Maternal Fetal Medicine	312-695-7542
2/5/2018 3:45 PM	Maternal Fetal Group	Maternal Fetal Medicine	312-695-7542

Patient Instructions**Shingles (Herpes Zoster)**

Talk to your healthcare provider about the shingles vaccine.

Shingles is also called herpes zoster. It is a painful skin rash caused by the herpes zoster virus. This is the same virus that causes chickenpox. After a person has chickenpox, the virus remains inactive in the nerve cells. Years later, the virus can become active again and travel to the skin. Most people have shingles only once, but it is possible to have it more than once.

What are the risk factors for shingles?

Anyone who has ever had chickenpox can develop shingles. But your risk is greater if you:

- Are 50 years of age or older
- Have an illness that weakens your immune system, such as HIV/AIDS
- Have cancer, especially Hodgkin disease or lymphoma
- Take medicines that weaken your immune system

What are the symptoms of shingles?

- The first sign of shingles is usually pain, burning, tingling, or itching on one part of your face or body. You may also feel as if you have the flu, with fever and chills.
- A red rash with small blisters appears within a few days. The rash may appear as follows:
 - ◆ The blisters can occur anywhere, but they're most common on the back, chest, or abdomen.
 - ◆ They usually appear on only one side of the body, spreading along the nerve pathway where the virus was inactive.
 - ◆ The rash can also form around an eye, along one side of the face or neck, or in the mouth.
 - ◆ In a few people, usually those with weakened immune systems, shingles appear on more than one

Patient Instructions (continued)

part of the body at once.

- After a few days, the blisters become dry and form a crust. The crust falls off in days to weeks. The blisters generally do not leave scars.

How is shingles treated?

For most people, shingles heals on its own in a few weeks. But treatment is recommended to help relieve pain, speed healing, and reduce the risk of complications. Antiviral medicines are prescribed within the first 72 hours of the appearance of the rash. To lessen symptoms:

- Apply ice packs (wrapped in a thin towel) or cool compresses, or soak in a cool bath.
- Use calamine lotion to calm itchy skin.
- Ask your healthcare provider about over-the-counter pain relievers. If your pain is severe, your healthcare provider may prescribe stronger pain medicines.

What are the complications of shingles?

Shingles often goes away with no lasting effects. But some people have serious problems long after the blisters have healed:

- Postherpetic neuralgia. This is the most common complication. It is severe nerve pain at the place where the rash used to be. It can last for months, or even years after you have had shingles. Medicines can be prescribed to help relieve the pain and improve quality of life.
- Bacterial infection. Shingles blisters may become infected with bacteria. Antibiotic medicine is used to treat the infection.
- Eye problems. A person with shingles on the face should see his or her healthcare provider right away. Shingles can cause serious problems with vision, and even blindness.

Very rarely shingles can also lead to pneumonia, hearing problems, brain inflammation, or even death.

When to seek medical care

Contact your healthcare provider if you experience any of the following:

- Symptoms that don't go away with treatment
- A rash or blisters near your eye
- Increased drainage, fever, or rash after treatment, or severe pain that doesn't go away

How can shingles be prevented?

You can only get shingles if you have had chicken pox in the past. Those who have never had chickenpox can get the virus from you. Although instead of developing shingles, the person may get chickenpox. Until your blisters form scabs, avoid contact with others, especially the following:

- Pregnant women who have never had chickenpox or the vaccine
- Infants who were born early (prematurely) or who had low weight at birth
- People with weak immune system (for example, people receiving chemotherapy for cancer, people who have had organ transplants, or people with HIV infections)

The shingles vaccine

If you're 60 years of age or older, ask your healthcare provider if you should receive the shingles vaccine. The vaccine makes it less likely that you will develop shingles. If you do develop shingles, your symptoms will likely be milder than if you hadn't been vaccinated. Note: Although the vaccine is licensed for people 50 years of age or older, the CDC does not recommend the vaccine for those who are 50 to 59 years old.

Date Last Reviewed: 10/1/2016

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NMG Website

You can visit the Northwestern Medical Group Website at <http://nmg.nm.org/> to find a physician, request an

NMG Website (continued)

appointment, pay your bill and for many other useful resources.

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Carhee, Stephanie
2/5/2018 3:45 PM Office Visit-New

Description: **50 year old female**
Provider: **Alan M Peaceman**
Department: **Maternal Fetal Medicine**

MATERNAL FETAL MEDICINE
675 N St Clair St, Ste 14-200
Chicago IL 60611-5975
Tel 312-695-7542
Fax 312-695-4425

Please take a few moments to review this summary of your visit. We recommend that you keep this information private as it contains your personal health information and instructions. Please notify the doctor's office if you have any changes or updates. Thank you.

Vitals

BP	Ht	Wt	BMI
140/90 mmHg	5' 6.5" (1.689 m)	201 lb 11.5 oz (91.5 kg)	32.07 kg/m2

Allergies

High: Contrast Dye

Unspecified: Ampicillin; Clarithromycin; Gadolinium Derivatives; Levaquin [levofloxacin]; Lovenox [enoxaparin]; Penicillins; Tetracyclines & Related

Medical Conditions Addressed During This Visit

Supervision of high risk pregnancy in first trimester - Primary
Pregnancy with type 2 diabetes mellitus in first trimester

Current Medications

Calcium Carbonate 600 MG TABS (Taking)	2 CAPSULES DAILY WITH A MEAL
Fat Emulsion (INTRALIPID IV) (Taking)	14 days
fondaparinux 2.5 MG/0.5ML SOLN SQ injection (Taking)	2.5 MG DAILY
predniSONE 10 MG TABS (Taking)	2 TABLET DAILY
Progesterone 200 MG SUPP (Taking)	1 PER VAGINA DAILY
Raspberry Ketones 100 MG CAPS (Taking)	None Entered
Cholecalciferol (VITAMIN D3) 400 UNITS TABS (Taking)	2 CAPSULES DAILY WITH A MEAL
Unverified Medication	progesterone and estrogen injections per pregnancy
Valacyclovir HCl (VALTREX) 1 G TABS	1 tab po TID x 7 days
Prenatal Multivit-Min-Fe-FA (PRENATAL VITAMINS PO) (Taking)	None Entered
acetone, urine, test (KETOSTIX) STRP	test daily as directed
SYNTHROID 75 MCG TABS (Taking)	1 TABLET DAILY
LEVEMIR FLEXTOUCH 100 UNIT/ML SOPN (Taking)	INJECT 10 UNITS SUBCUTANEOUSLY NIGHTLY AT BEDTIME
Glucose Blood STRP	Test four times per day
Blood Glucose Monitoring Suppl W/DEVICE KIT	Test four times daily
NOVOLOG FLEXPEN 100 UNIT/ML SOPN (Taking)	Use before meals as directed
Insulin Pen Needle 32G X 4 MM MISC	for use with Novolog pen
Glucose Blood STRP	testing 3 times daily
Lancets MISC	Testing 3 times daily

Medications Administered During Visit

None

Immunizations/medications Administered on Date of Encounter - 2/5/2018

No immunizations or medications administered today

Other Orders Placed During This Visit

Normal Orders This Visit

CHLAMYDIA TRACHOMATIS PCR METHOD**CREATININE, URINE RANDOM**

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

CULTURE, URINE

Scheduling Instructions:

This lab test is intended to be collected back office. Paper order requisition must be sent with the specimen.

NEISSERIA GONORRHEA PCR METHOD**NEW OB PRECERT (NMFF) REFERRAL****PROTEIN URINE, RANDOM**

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

Future Labs/Procedures

Expected by

Expires

ANTIBODY SCREEN

2/5/2018

8/5/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

BLOOD TYPING, ABO & RH

2/5/2018

8/5/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

CBC W/PLATELET

2/5/2018

8/5/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

CULTURE, URINE

2/5/2018

8/5/2018

Scheduling Instructions:

This lab test is intended to be collected back office. Paper order requisition must be sent with the specimen.

HEPATITIS B SURFACE ANTIGEN

2/5/2018

8/5/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

HIV AG/AB COMBO

2/5/2018

8/5/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

RUBELLA ANTIBODY

2/5/2018

8/5/2018

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

SYPHILIS ANTIBODY,

2/5/2018

8/5/2018

TREPONEMAL W/REFLEX

Scheduling Instructions:

To complete your lab work, please proceed to one of the NMG Lab Services areas.

TSH-NMFF SHARED

2/5/2018

8/5/2018

Scheduling Instructions:

Please schedule all lab appointments with a Patient Service Representative. You may also schedule a lab appointment by calling 312-695-0990 or 312-664-5400 if you are a patient of Hematology Oncology Associates at 676 N. St. Clair St Suite 2140

Galter Cancer Center patients: please report to the 21st floor check-in desk 10 minutes prior to your scheduled appointment time.

Prentice Cancer Center patients: please report to Prentice 4th floor check-in desk 10 minutes prior to your scheduled appointment time

Hematology Oncology Associates patients: please report to the check-in desk on the 21st floor of Arkes Pavilion,

Other Orders Placed During This Visit (continued)

Future Labs/Procedures	Expected by	Expires
Suite 2140 10 minutes prior to your scheduled appointment time		

OB/GYN patients please proceed to the 14th floor laboratory check-in. After 5:00 pm, please proceed to the 18th floor laboratory.

Follow-up

Return in 1 month (on 3/5/2018) for Return appt 4 weeks.

Future Appointments

	Provider	Department	Dept Phone
2/21/2018 11:00 AM	Diabetic APN, MFM	Maternal Fetal Medicine	312-695-7542
3/7/2018 11:00 AM	Maternal Fetal Group	Maternal Fetal Medicine	312-695-7542
5/14/2018 4:00 PM	Karlyn A Martin	NM Center for Bleeding and Clotting Disorders	312-695-0990

MyNM MyChart Upgrade Notice**Improvements to Your NM MyChart Account**

Northwestern Medicine is working to improve your experience with your health information via NM MyChart. We have upgraded the online portal with enhanced features that make it more comprehensive and interactive. You will be asked to upgrade your NM MyChart account starting March 3, 2018. The process takes less than five minutes and securely transfers all of your medical information from your original account to your upgraded account.

Please note, even if you usually use the NM MyChart mobile app to access your account, you need to complete the upgrade process by logging in through the internet on a computer, tablet or smartphone. Once your account is upgraded, you can continue using the NM MyChart app.

What you need to do:

- Starting on March 3, go to <https://mychart.nm.org>
- You will be prompted to log in to your account
- If you don't remember your login information for your current account, click the following link to have it sent to you: <https://mychart.nm.org/mychart/recoverlogin.asp>
- Once you log in, your information will be securely transferred to your upgraded account, and you will be prompted that your account has successfully upgraded
- If your account doesn't upgrade automatically, you may be asked to create a new username and password. Your historical information will be linked and your new account will be updated with all of your information.

Once your account is upgraded, you will be able to:

- View and manage care received at any Northwestern Medicine facility.
- Complete the Pre Check-In process from home, saving you time when you arrive for your appointment.
 - You can add or verify insurance
 - Add credit card information to preauthorize co-pays
 - Update information about your medical history.
- Receive reminders to schedule appointments for routine preventive care, such as colon cancer screening, breast cancer screening, bone density testing, pap smears and seasonal flu vaccines.
- Update your lists of medications and allergies at any time.
- View orders and tests placed by your physician.
- Request records and view copies of information released from the Medical Records Department.
- View statements and pay your bills from visits to any NM facility
- Continue to schedule appointments with select outpatient specialties
- Adult proxies for patients 12-17 years old can request full access to an adolescent patient's NM MyChart account with the patient's consent. Talk to your physician's office for more information.
- Patients who are pregnant can pre-register for their day of delivery to save time when arriving at the hospital

***All of your medical and visit information will be moved into your upgraded NM MyChart account. After March 3, 2018, a few situations may arise that would require your special attention:

MyNM MyChart Upgrade Notice (continued)

- Billing information for visits prior to March 3, 2018, will not be viewable in NM MyChart. To view or pay bills for visits that occurred before March 3, please go to nm.org and click "Pay a Bill."
- Adjustments to existing autopayment plans will need to be made by contacting billing customer service at 844.669.2455.
- Proxies will need to re-establish proxy relationships. Please contact the NM MyChart Help Desk at 1.855.HLP.MYNM for more information.

If you have any questions regarding your upgraded NM MyChart account or these new features, please call the NM MyChart Help Desk at 1.855.HLP.MYNM.

NMG Website

You can visit the Northwestern Medical Group Website at <http://nmg.nm.org/> to find a physician, request an appointment, pay your bill and for many other useful resources.



Obstetrics Report
Franklin University

Preliminary

Rosalind

Obstetrics Report

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Rosalind Franklin University

Patient / Exam Information

Date of Exam: **01/12/2018**

Name	Carhee Stephanie	LMP	12/01/2017	Gravida	2
DOB, Age	05/11/1967, 50	DOC		Para	0
Sex	Female	EDD	09/07/2018	AB	2
Patient ID	49914	GA	6w0d	Ectopic	
		GA(AUA)	5w5d	Fetus	1
		EDD(AUA)	09/09/2018		

Sonographer **nc** Exam Type **6w0d** Comment **FET 12.20.17 (5)**
Indication **rec misc/ 6 ivf fail.**

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GP	GA
CRL (Hadlock)	<input checked="" type="checkbox"/>	0.22 cm	0.21	0.22		avg.	<1%	5w5d
YS		0.41 cm	0.41			avg.		
GS (Rempen)	<input type="checkbox"/>	1.14 cm	1.14			avg.	37.7%	5w6d

2D Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Uterus								
Cervix Length	4.05 cm	4.05						avg.

M-Mode Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Fetal Heart Rate								
Ventricular FHR	98 bpm	98						avg.

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Placenta								
PS	-17.11 cm/s	-17.11						max
ED	-9.67 cm/s	-9.67						max
RI	0.43	0.43						avg.

Wal

Date: **01/12/2018**

Perf. Physician:

Sonographer: **nc**

*Single viable IUP
no seh.*

1/1
01/12/2018 11:16:31 AM

Obstetrics Report

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Rosalind Franklin University

Patient / Exam Information				Date of Exam: 01/19/2018	
Patient ID	49914	LMP	12/02/2017	Gravida	4
Name	Carhee Stephanie	DOC		Para	
DOB, Age	05/11/1967, 50	EDD	09/08/2018	AB	3
Sex	Female	GA	6w6d	Ectopic	
		GA(AUA)	6w2d	Fetus	1
		EDD(AUA)	09/12/2018		
Sonographer	np	Exam Type	natural	Comment	fet 12-27-2017(5)
Indication	rec misc				

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GP	GA
→ CRL (Hadlock)	✓	0.54 cm	0.52	0.57		avg.	<1%	6w2d
YS		0.41 cm	0.40	0.42		avg.		
GS (Rempen)	□	1.59 cm	1.95	1.14	1.68	avg.	23.1%	6w3d

2D Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Uterus								
Cervix Length	4.19 cm	4.19						avg.

M-Mode Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Fetal Heart Rate								
Ventricular FHR	136 bpm	136						avg.

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Placenta								
PS	-14.38 cm/s	12.03	-14.38					max
ED	-8.51 cm/s	7.04	-8.51					max
RI	0.41	0.41	0.41					avg.

2D Generic	Value	m1	m2	m3	m4	m5	m6	Meth.
Dist.								
D	2.16 cm	3.37	X	0.95				avg.

MOSTLY ORGANIZED

SCH



Obstetrics Report
Franklin University

Preliminary

Rosalind

Obstetrics Report

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Rosalind Franklin University

Patient / Exam Information				Date of Exam: 01/24/2018	
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Patient ID	49914	LMP	12/02/2017	Gravida	4
Name	Carhee Stephanie	DOC		Para	
DOB, Age	05/11/1967, 50	EDD	09/08/2018	AB	3
Sex	Female	GA	7w4d	Ectopic	
		GA(AUA)	7w3d	Fetus	1
		EDD(AUA)	09/09/2018		

Sonographer	np	Exam Type	7w4d	Comment	fet 12-27-2017(5)
Indication	rec misc				

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GP	GA
→ CRL (Hadlock)	<input checked="" type="checkbox"/>	1.19 cm	1.15	1.24		avg.	57.6%	7w3d
YS		0.41 cm	0.44	0.37		avg.		
→ GS (Rempen)	<input type="checkbox"/>	1.83 cm	2.21	1.51	1.77	avg.	10.8%	6w5d

2D Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Uterus								
Cervix Length	4.51 cm	4.51						avg.

M-Mode Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Fetal Heart Rate								
Ventricular FHR	159 bpm	158	160					avg.

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Placenta								
PS	-13.79 cm/s	-13.79	-13.79					max
ED	-8.22 cm/s	-8.22	-8.22					max
RI	0.40	0.40	0.40					avg.

	Value	m1	m2	m3	m4	m5	m6	Meth.
								avg.

49 cm

3.27 X 1.71

*Partially
organized
SCH*



1 / 2
01/24/2018 7:29:15 AM

ammon

*First notice of
slowly gestation
SAC,*

**Obstetrics Report**
Franklin University*Preliminary***Rosalind****Obstetrics Report**

Page 1/2

Rosalind Franklin UniversityDate of Exam: **01/30/2018****Patient / Exam Information**

Patient ID	49914	LMP	12/02/2017	Gravida	4
Name	Carhee Stephanie	DOC		Para	
DOB, Age	05/11/1967, 50	EDD	09/08/2018	AB	3
Sex	Female	GA	8w3d	Ectopic	
		GA(AUA)	8w1d	Fetus	1
		EDD(AUA)	09/10/2018		

Sonographer	np	Exam Type	8w3d	Comment	fet 12-27-2017(5)
Indication	rec misc				

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GP	GA
CRL (Hadlock)	<input checked="" type="checkbox"/>	1.74 cm	1.74	1.71	1.78	avg.	43.9%	8w1d
YS		0.48 cm	0.56	0.39		avg.		
GS (Rempen)	<input type="checkbox"/>	2.24 cm	2.79	1.99	1.95	avg.	5.5%	7w1d

2D Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
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Uterus								avg.
Cervix Length	4.86 cm	4.86						

M-Mode Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
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Fetal Heart Rate								avg.
Ventricular FHR	179 bpm	179	179					

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
----------------------	-------	----	----	----	----	----	----	-------

Placenta								max
PS	16.14 cm/s	11.15	16.14					max
ED	9.68 cm/s	6.16	9.68					avg.
RI	0.43	0.45	0.40					

e	m1	m2	m3	m4	m5	m6	Meth.
---	----	----	----	----	----	----	-------

.35 cm	1.60 X	1.09					avg.
---------------	---------------	-------------	--	--	--	--	-------------

SCt partially organized

*Stopped
Blood thinner*

**Obstetrics Report
Franklin University**Preliminary**Rosalind****Obstetrics Report**

Page 1/2

Rosalind Franklin University**Patient / Exam Information**Date of Exam: **02/02/2018**

Patient ID **49914**
 Name **Carhee Stephanie**
 DOB, Age **05/11/1967, 50**
 Sex **Female**

LMP **12/02/2017**
 DOC
 EDD **09/08/2018**
 GA **8w6d**
 GA(AUA) **8w5d**
 EDD(AUA) **09/09/2018**

Gravida **4**
 Para
 AB **3**
 Ectopic
 Fetus **1**

Sonographer **np** Exam Type **8w6d** Comment **fet 12-27-2017(5)**
 Indication **rec misc**

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GP	GA
CRL (Hadlock)	<input checked="" type="checkbox"/>	2.07 cm	2.01	2.08	2.13	avg.	39.7%	8w5d
YS		0.44 cm	0.48	0.39		avg.		
GS (Rempen)	<input type="checkbox"/>	2.40 cm	3.13	2.12	1.96	avg.	3.5%	7w3d

2D Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Uterus								
Cervix Length	4.87 cm	4.87						avg.

M-Mode Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Fetal Heart Rate								
Ventricular FHR	179 bpm	179						avg.

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Placenta								
PS	-12.03 cm/s	6.10	-12.03					max
ED	-7.34 cm/s	3.75	-7.34					max
--	0.39	0.39	0.39					avg.

	m1	m2	m3	m4	m5	m6	Meth.
ie							
	1.25 cm	1.50 X	1.00				avg.

ADDED

Blood thinner
 back in to
 regiment.

Stop BEX Replaced
 with Prenidamin

10 FRESH BREED

1/2
 02/02/2018 10:10:08 AM


Obstetrics Report
Franklin University
Rosalind
Obstetrics Report

Page 1/1

Rosalind Franklin University

Patient / Exam Information				Date of Exam:	02/23/2018
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Name	Carhee Stephanie	LMP	12/01/2017	Gravida	2
DOB, Age	05/11/1967, 50	DOC		Para	0
Sex	Female	EDD	09/07/2018	AB	2
Patient ID	49914	GA	12w0d	Ectopic	
		GA(AUA)	12w0d	Fetus	1
		EDD(AUA)	09/07/2018		

Sonographer	nc	Exam Type	12w0d	Comment	12.20.17 (5)
Indication	rec misc/ 6 ivf fail.				

2D Measurements	AUA	Value	m1	m2	m3	Meth.	GP	GA
CRL (Hadlock)	<input checked="" type="checkbox"/>	5.34 cm	5.43	5.28	5.32	avg.	31.3%	12w0d

2D Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
Uterus								
Cervix Length	4.33 cm	4.33						avg.

M-Mode Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
---------------------	-------	----	----	----	----	----	----	-------

Fetal Heart Rate								
Ventricular FHR	168 bpm	168						avg.

Doppler Measurements	Value	m1	m2	m3	m4	m5	m6	Meth.
----------------------	-------	----	----	----	----	----	----	-------

Placenta								
PS	28.03 cm/s	28.03						max
ED	17.11 cm/s	17.11						max
RI	0.39	0.39						avg.

was 0.39

Date: 02/23/2018

Perf. Physician:

Sonoographer: nc

no sch.

 1/1
 02/23/2018 11:22:54 AM

From: Stephanie Carhee scarhee@ucinterlink.com
Subject: Stephanie Carhee - Medication list - Feb
4, 2018
Date: Feb 4, 2018 at 11:39:01 PM
To: Stephanie Carhee scarhee@ucinterlink.com



2/4/18

Below is a medication list from Medisafe, the #1 medication management mobile app.

Active Meds

Calcium (600 mg)

Taken once a day, every day

E2V Vaginal (100 mg)

Taken once a day, every day

Glucose meter

Taken 3 times a day, every day

Intralipid

Taken once a day, every 14 days

Levemir (30 Units)

Taken twice a day, every day

~~Lovenox~~ (0.4 mg) Fondaparinux

Taken once a day, every day

Novolog (2 Units)

Taken twice a day, every day

Prednisone (10 mg)

Taken twice a day, every day

Prenatal Gummies Soft Chew

Taken once a day, every day

Progesterone (200 mg)

Taken twice a day, every day

Progesterone

Taken once a day, every day

Raspberry Ketone Ultra Capsule

Taken once a day, every day

Synthroid (75 mcg)

Taken once a day, every day

Vitamin D3 (5,000 iu)

Taken once a day, every day

Inactive Meds

Bayer Aspirin (81 mg)

Taken once a day, every day

C-progesterone (1 ml)

Taken once a day, every day

Ciprofloxacin

Taken twice a day, every day

Clindamycin (150 mg)

Taken once a day, every day

DHA Omega-3 (200 mg)

Taken once a day, every day

Depo-Estradiol (0.03 Units)

Taken once a day, every 3 days

Dexamethasone (0.75 mg)

Taken once a day, every day

Sildenafil Citrate USP (25 mg)

Taken 4 times a day, every day

Slow Fe (45 mg)

Taken once a day, every day

Vitamin E 400 IU

Taken once a day, every day

Are you a physician interested in seeing your
patients' real-time adherence data and
health measurements? Try the Medisafe
Provider's Portal demo today.

Stephanie Carhee



NORTHWESTERN MEDICAL GROUP
DEPARTMENT OF OBSTETRICS AND GYNECOLOGIC ULTRASOUND
675 North St. Clair, Suite 14-200 Chicago, IL 60611
Tel:312-695-8095 Fax:312-695-4424



OBSTETRICS REPORT

Signed Final 01/17/2018 10:32 am

Patient Info

ID #: 0102291476 Name: STEPHANIE CARHEE D.O.B.: 05/11/67 (50 yrs)(F) Date: 01/17/2018 09:31 am

Performed By

Performed By: Michelle Pagan RDMS,RTR
Attending: Leeber Cohen MD
Exam Location: NMG Galter 14-200

Referred By: Alan Peaceman MD
Ref Address: 675 N St Clair 14-200
Chicago IL 60611

Service(s) Provided

OB Transvaginal

Indications

Viability

Fetal Evaluation

Number Of Fetuses:	1	Fetal Heart Rate(bpm):	127
Preg. Location:	Intrauterine	Cardiac Activity:	Observed
Gest. Sac:	Visualized	Fetal Lie:	Gestational age too early to evaluate
Yolk Sac:	Visualized	Presentation:	Gestational age too early to evaluate
Fetal Pole:	Visualized	Placenta:	Gestational age too early to evaluate

Amniotic Fluid

Amniotic F.V.: Within normal limits

Biometry

CRL: 5.2 mm. G. Age: 6w 2d EDD: 9/10/2018

Gestational Age

Best 6w 3d Determined By: Embryo Transfer (12/20/17) EDD: 09/09/18

Anatomy

Other: Gestational age too early to evaluate fetal anatomy.

Cervix Uterus Adnexa

Cervix: Within normal limits
Uterus: Myomas seen
Cul De Sac: No fluid seen
Left Ovary: Not visualized
Right Ovary: Not visualized

Comments

Transvaginal ultrasound was performed due to early gestational age.

Thank you for allowing us to participate in the care of Ms. STEPHANIE CARHEE. Please do not hesitate to call us if you have any questions.

Leeber Cohen, MD

Electronically Signed Final Report 01/17/2018 10:32 am

**Rosalind Franklin University Center for Women's Health
Reproductive Medicine**

830 West End Ct, Vernon Hills, IL, 60061 Phone: 847-247-6900 Fax: 847-247-6951

2ND/3RD TRIMESTER ULTRASOUND REPORT

Name Carhee, Stephanie ID 6150
Age 50 yrs 3 0 Abortion 2 IVFf 6
History recurrent miscarriage

Scan Date 4/5/2018
LMP 12/2/2017
EDC (by LMP) 9/8/2018
Gestation Age 17 wks 5 d
by date

Fetal Number Single
Presentation Cephalic

Biparietal Diameter (BPD) 3.9 cm 17 wks 6 d
Head Circumference (HC) 14.4 cm 17 wks 5 d
Abdomen Circumference (HC) 12 cm 17 wks 5 d
Femoral Length (FL) 2.5 cm 17 wks 5 d

Composite Age 17 wks 5 d
EDC (US) 9/8/2018

Estimated Fetal Weight 206 ± 30 grams
Weight Percentile - th percentile
Fetal Heart Rate 157 bpm

Placenta posterior fundal
Placental Artery RI 0.35
Umbilical Artery S/D
Cervix length 3.9 cm

FETAL ANATOMY

The following were visualized:

Cranium ☒
Cerebellum ☒
Cisterna Magnum ☒
Face/orbits ☒
Spine ☒
4 chamber heart ☐
Gastric bubble ☒
Abdominal wall ☒
3 vessel cord ☐
Kidneys ☐
Bladder ☒
Extremities ☒

BIOPHYSICAL PROFILE

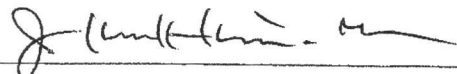
NST
Fetal Tone
Fetal Movement
Fetal Breathing
Amniotic Fluid
BPP Score
AFI cm

IMPRESSIONS

Single viable intrauterine pregnancy is observed in cephalic presentation.
Composite gestational age is 17 weeks and 5 days.
Fetal size and growth are appropriate for gestational age. No gross fetal anomalies were seen.
Placental artery Doppler study is within normal limits. Placenta is posterior fundal.
Cervical length is within normal range. Due to maternal body habitus scan is limited.
Incidental findings: numerous cysts are identified in maternal mid abdomen, largest is 13.3 cm.

Follow-up ultrasound examination is recommended as needed.

Sonographer


Joanne Kwak-Kim, MD

Results for CARHEE, STEPHANIE L 05/11/1967 (50yo F) #49914 E#49914

Report	Result	Ref. Range	Units	⚠	Status	Lab																																																	
□ COMPLETE BLOOD COUNT (WITH REFLEX TO MANUAL DIFFERENTIAL) (#1534014, Final, 4/5/2018 1:00pm, tied to order #1533878)																																																							
<table border="1"> <tr> <td>Note to Patient</td> <td colspan="6"></td> </tr> <tr> <td>Ordering Provider</td> <td>JOANNE KWAK-KIM, MD</td> <td>Performing Lab</td> <td colspan="4">RFUMS CLINICAL IMMUNOLOGY LAB 3333 GREEN BAY RD NORTH CHICAGO IL 60064-3095</td> </tr> <tr> <td>Specimen/Accession ID</td> <td>135505</td> <td>Specimen Source</td> <td colspan="4">Blood venous</td> </tr> <tr> <td>Specimen Coll. Date</td> <td>04/05/2018 13:00</td> <td>Result Status</td> <td colspan="4">Final</td> </tr> <tr> <td>Specimen Rec. Date</td> <td>04/05/2018 16:02</td> <td>Report Status</td> <td colspan="4"></td> </tr> <tr> <td>Specimen Reported Date</td> <td>04/05/2018 16:17</td> <td colspan="5"></td> </tr> </table>							Note to Patient							Ordering Provider	JOANNE KWAK-KIM, MD	Performing Lab	RFUMS CLINICAL IMMUNOLOGY LAB 3333 GREEN BAY RD NORTH CHICAGO IL 60064-3095				Specimen/Accession ID	135505	Specimen Source	Blood venous				Specimen Coll. Date	04/05/2018 13:00	Result Status	Final				Specimen Rec. Date	04/05/2018 16:02	Report Status					Specimen Reported Date	04/05/2018 16:17												
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Specimen Reported Date	04/05/2018 16:17																																																						
WBC	6.9	3.1-10.5	10 ³ /uL		Final																																																		
RBC	4.13	4.01-5.85	10 ⁶ /uL		Final																																																		
HGB	12.6	11.8-17.5	g/dL		Final																																																		
HCT	36.9	36.2-52.3	%		Final																																																		
MCV	89	83-96	fL		Final																																																		
MCH	30.5	26.7-32.8	pg		Final																																																		
MCHC	34.1	31.9-34.4	g/dL		Final																																																		
RDW	13.6	7.8-16.2	%		Final																																																		
PLT	284	151-402	10 ³ /uL		Final																																																		
NEUT%	70.1	43.2-77.0	%		Final																																																		
LYMP%	18.3	19.9-46.3	%		Low	Final																																																	
MONOC%	9.1	1.7-9.3	%		Final																																																		
EOSIN%	2.1	0.0-2.9	%		Final																																																		
BASO%	0.4	0.0-1.0	%		Final																																																		
Order Type	Result Type	Result Value	Ref. Range	Result Units	Highlight	Date Collected	Note																																																
CBC W/ AUTO DIFF					<input type="checkbox"/>	04/05/2018																																																	
□ COMPREHENSIVE METABOLIC PANEL (#1534038, Final, 4/5/2018 1:00pm, tied to order #1533883)																																																							
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GLU	82	75-110	mg/dL		Final																																																		
TP	6.3	5.8-8.1	g/dL		Final																																																		
ALB	3.20	3.20-5.00	g/dL		Final																																																		
GLOB	3.1	2.2-4.2	g/dL		Final																																																		
A/G	1.0	0.8-2.0			Final																																																		
TBILI	0.40	0.10-1.30	mg/dL		Final																																																		
AST	19	17-59	U/L		Final																																																		
ALT	29	21-72	U/L		Final																																																		

From:RFUHS Reproductive Medicine

847 247 6951

04/06/2018 14:16

#254 P.003/005

Results for CARHEE, STEPHANIE L 05/11/1967 (50yo F) #49914 E#49914

<u>ALKP</u>	68	20-125	U/L		Final	
<u>CA</u>	9.6	8.5-10.3	mg/dL		Final	
<u>BUN</u>	4	9-20	mg/dL	Low	Final	
<u>CREA</u>	0.50	0.55-1.25	mg/dL	Low	Final	
<u>B/CR</u>	8.0	6.0-25.0			Final	
<u>NA+</u>	133	135-146	mmol/L	Low	Final	
<u>K+</u>	3.4	3.5-5.3	mmol/L	Low	Final	
<u>CL-</u>	104	95-108	mmol/L		Final	
<u>ECO2</u>	21.0	22.0-30.0	mmol/L	Low	Final	

Order Type	Result Type	Result Value	Ref. Range	Result Units	Highlight	Date Collected	Note	
CMP, SERUM OR PLASMA					<input type="checkbox"/>	04/05/2018		⊗ ⊕

☐ ESTRADIOL (#1534072, Final, 4/5/2018 1:00pm, tied to order #1533263)

